

ORDER

I, TERRANCE H. MONTAGUE, BZ-2761 AM ASKING THE COURT TO CLOSE DOWN THIS SAIL YALL DID REQUE A MOTION DATED 10-23-05 EXPLAIN THINGS ABOUT THIS SAIL, YOU DO HAVE PEOPLE HERE WHO IS MEN/WOMEN AND THAT DRINK PISS SEAT SHIT I SEND YALL A COMPLAINT DATED 11-22-05, THESE PEOPLE DO UNHEALTHY THINGS TO PEOPLE

SWEAR, TERRANCE H. MONTAGUE
IS TELLING THE TRUTH.

DATE: 11-28-05

OFFICIAL INMATE GRIEVANCE

TO: FACILITY GRIEVANCE COORDINATOR

Chief Officer

FACILITY:

Donnerstag Jail

DATE:

11-28-05

FROM: (INMATE NAME & NUMBER)

FERRANCE MONTAGUE, BZ-2761

SIGNATURE of INMATE:

Senon Montague

WORK ASSIGNMENT:

HOUSING ASSIGNMENT:

← NONE →

6-5 B-POD CELL 4

INSTRUCTIONS:

1. Refer to the DC-ADM 804 for procedures on the inmate grievance system.
2. State your grievance in Block A in a brief and understandable manner
3. List in Block B any actions you may have taken to resolve this matter. Be sure to include the identity of staff members you have contacted.

- A. Provide a brief, clear statement of your grievance. State all relief that you are seeking. Additional paper may be used, maximum two pages. (One DC-804 Part 1 form and one, one-sided 8 1/2" x 11" page).

*I AM REQUESTING A LL A ORDER TO HAVE WITH THE ONE DATED 10-23-05 AND THE COMPLAINT DATED 11-22-05
11-28-05 ORDER*

DEC 01 2005

AAA

- B. List actions taken and staff you have contacted, before submitting this grievance.

Your grievance has been received and will be processed in accordance with DC-ADM 804.

Signature of Facility Grievance Coordinator

Date

1600 Walters Mill Rd. Somerset, PA 15510

NAME

NUMBER

INMATE MAIL
PA DEPT. OF CORRECTIONS

1710840983-83 B011

U.S. District Court
238 Walnut Street
P.O. Box 983
Harrisburg, PA 17108



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MAILED FROM ZIP CODE 15501